PART B - FEE(S) TRANSMITTAL Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 2 0 2004 Alexandria, Virginia 22313-1450 or Fax (703) 746-4000 INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate ARATMATE correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 20792 7590 08/24/2004 MYERS BIGEL SIBLEY & SAJOVEC Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile PO BOX 37428 RALEIGH, NC 27627 transmitted to the USPTO (703) 746-4000, on the date indicated below 09/21/2004 RMEBRAH1 00000172 09873797 (Depositor's name atrina Holland 1330.00 OP 01 FC:1501 (Signature 02 FC:1504 300.00 OP <u>September</u> 2004 APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 09/873,797 06/04/2001 Nnochiri N. Ekwuribe 9233.63 TITLE OF INVENTION: MIXTURES OF DRUG-OLIGOMER CONJUGATES COMPRISING POLYALKYLENE GLYCOL, USES THEREOF, AND METHODS OF MAKING SAME ISSUE FEE PUBLICATION FEE APPLN. TYPE SMALL ENTITY TOTAL FEE(S) DUE DATE DUE \$1630 11/24/2004 nonprovisional NO \$1330 \$300 **EXAMINER** ART UNIT CLASS-SUBCLASS RUSSEL, JEFFREY E 1654 514-002000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list <u> 1 Moore & Van Allen PL</u>LC (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. 2 William A. Barrett (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY) (A) NAME OF ASSIGNEE

Nobex Corporation	Durham, North Carolina							
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5. Change in Entity Status (from status indicated above)	_							
a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.	☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).							
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42,296

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FEE TRANSMITTAL For FY 2004			Complete if Known							
			plication	on Num	ber	09/873,797	09/873,797			
			ng Da	te		June 4, 2001	June 4, 2001			
			First Named Inventor			Ekwuribe, Nnochiri N.				
Effective 20/01/2003. Patent fees are subject to annual revision.			amine	Name)	Russel, Jeffrey E.				
Application Claims small entity status. See 37 CFR 1.27			Unit			1654				
TOTAL AMOUNT OF PAYMENT (\$) 1630.00			ornev	Docket	No.	014811-162.63				
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METHOD OF PAYMENT	1	FEE CALCULATION (continued)								
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☐ Charge any additional fee(s) or any underpayment of fee(s)			2,520	1812	2,520	For filing a reques	ling a request for ex parte reexamination			
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FEE CALCULATION			1,840*	1805	1,840*	Requesting publication of SIR after Examiner action				
1. BASIC FILING FEE		1251	110	2251	55	Extension for repl	ly within first mont	th		
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3081	OTAL (1) (\$) 0.00	1452 1453		2452 2453	665	Petition to revive				
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE			1,330	2501	665		un fore (ou unique)			
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